

PTO/SB/83 (09-04)
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## **REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/902,525
Filing Date	July 9, 2001
First Named Inventor	Jay M. SHORT
Art Unit	1652
Examiner Name	R. Hutson
Attorney Docket Number	564462001020

<b>To:</b> P.	ommissioner for Patents O. Box 1450 exandria, VA 22313-1450		_				
	Please withdraw me as attorney or agent for the above identified patent application, and						
	the attorneys/agents of record.		·				
	attorneys/agents (with registration	numbers) li	stad on the	attached r	aner(s)	or	
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	attorneys/agents associated with ( E: This box can only be checked w			ev of reco		annli	l
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The reaso	ns for this request are:						
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2. X C	hange the correspondence addres	s and direct	an luture co	ятеѕропи			
The	address associated with Customer	Number:					
OR				-			
X Firm	Lynn Linkowski  Diversa Corporation						
Address	4955 Directors Place						
			T			T_:	100101100
City	San Diego	State	CA			Zip	92121-1609
Country	United States	1			1/05	0) 50	0.5050
Telephone	(858) 526,5450	<del>////</del>	2	Fax	(85	8) 52	6-5950
Signature	7h. 2	NWO	~~~		_		
Name	Name Gregory P. Einhorn			Registration No.		38,440	
Date January 20, 2005 Telephone No. (858) 720-513			(858) 720-5133				
	NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

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To: P.C Ale	Commissioner for Patents  To: P.O. Box 1450 Alexandria, VA 22313-1450					
	ithdraw me as attorney or agent for the above identified	patent application, a	nd			
	ne attorneys/agents of record.	بہ	·			
	attorneys/agents (with registration numbers) listed on the	attached paper(s),	or			
x the	attorneys/agents associated with Customer Number	25225				
NOTE	E: This box can only be checked when the power of attor practitioners associated with a customer number.	ney of record in the	application is to all the			
The reason	ns for this request are:					
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2. 💢 CI	nange the correspondence address and direct all future of	correspondence to:				
	·					
	address associated with Customer Number:					
OR	Lynn Linkowski					
X Firm o	Lynn Linkowski  dual Name Diversa Corporation					
Address	4955 Directors Place					
City	San Diego State CA		Zip 92121-1609			
Country	United States					
Telephone	(858) 526 <sub>7</sub> 5450	Fax (858	8) 526-5950			
Signature	De l'Enlan					
Name	Gregory P. Einhorn	Registration No.	38,440			
Date	January 20, 2005	Telephone No.	(858) 720-5133			
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	Alexandria, VA 22313-1450.  Please withdraw me as attorney or agent for the above identified patent application, and						
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	he attorneys/agents of record.	_	<i>-</i>	_#			
	attorneys/agents (with registration			attached		<u>ог</u>	<del></del>
x the	attorneys/agents associated with C	Customer Nu	ımber		25225		
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The reaso	ns for this request are:						
This with	drawal is being made at the req	uest of the	applicant.				
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1. TI	he correspondence address is NOT	「affected by	this withdra	awal.			
2. X C	hange the correspondence address	s and direct	all future co	rrespond	lence to:		
The	address associated with Customer	Number:					
OR	<del></del>	_					
Firm	or Lynn Linkowski dual Name Diversa Corporation						
Address	4955 Directors Place						
		Ctata	CA			Zip	92121-1609
City	San Diego	State	104			1	
Country	United States	1		Fa	1X (85	8) 526	6-5950
Telephone	(858) 526,5450	<del></del>	/			-,	
Signature	1 7/20 2	1 WO	كسرم				
Name	Gregory P. Ein	horn			ation No.	<del> </del>	38,440
Date	January 20, 2	2005		Telepho		<u> </u>	(858) 720-5133
NOTE: W	NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

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## **TRANSMITTAL FORM**

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	ENCLOSURES (Check all that apply)						
Fee Transr	mittal Form	Drawing(s)	Afte to T	r Allowance Communication			
Fee	Attached	Licensing-related Papers		eal Communication to Board of eals and Interferences			
Amendmer	nt/Reply	Petition		eal Communication to TC leal Notice, Brief, Reply Brief)			
After	Final	Petition to Convert to a Provisional Application	Prop	prietary Information			
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Addr	ss Stat	us Letter			
Extension	of Time Request	Terminal Disclaimer		er Enclosure(s) (please tify below):			
Express Al	bandonment Request	Request for Refund	or Ager	Request for Withdrawal as Attorney or Agent and Change of			
Information Disclosure Statement		CD, Number of CD(s)		Correspondence Address (1 page, plus 2 copies)			
Certified C Document	opy of Priority (s)	Landscape Table on CD	Return	Postcard Receipt			
	issing Parts/ Application	Remarks					
Reply to Missing Parts under 37 CFR 1.52 or 1.53		CUSTOMER NO. 25	225	:			
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name	Firm Name MORRISON & FOERSTER LLE						
Signature	Signature . hvl.oe						
Printed name	Gregory P. Einhorn	orn ·					
Date	January 20, 2005	Re	No. 38,440	)			

I hereby certify that this correspondant envelope addressed to: Common terms of the co	nis signer for Patents P.O. Box 14	450. Alexandria, VA 22313-	ifficient postage as First Class Mail, in 1450, on the date shown below.
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